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CONFIRMATION NO. 8853

<b>SERIAL NUMBER</b> 10/656,245	<b>FILING DATE</b> 09/08/2003  <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> GMMD-1-1002	
<b>APPLICANTS</b> Gary J. Mullen, Pensacola, FL;					
<b>** CONTINUING DATA *****</b> <div style="display: flex; justify-content: space-between; align-items: center;"> <span>NONE</span> </div>					
<b>** FOREIGN APPLICATIONS *****</b> <div style="display: flex; justify-content: space-between; align-items: center;"> <span>NONE</span> </div>					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED <span style="float: right;">** SMALL ENTITY **</span> ** 12/01/2003					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY FL	SHEETS DRAWING 9	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 1
Verified and Acknowledged <div style="display: flex; justify-content: space-between;"> <div>Examiner's Signature _____</div> <div>Initials _____</div> </div>					
<b>ADDRESS</b> 25315 BLACK LOWE & GRAHAM, PLLC 701 FIFTH AVENUE SUITE 4800 SEATTLE , WA 98104					
<b>TITLE</b> Apparatus for treating pneumothorax and/or hemothorax					
<b>FILING FEE</b>  <b>RECEIVED</b> 800	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> All Fees         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.16 Fees ( Filing )         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.18 Fees ( Issue )         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> Other _____         </div> <div style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> Credit         </div>		